



FOR OFFICE USE ONLY
Approved by _____
Date _____
Sportsman _____
Confirmation _____

**NORWOOD RECREATION DEPARTMENT
CIVIC CENTER**

ROOM RESERVATION FORM

Contact Information

Today's Date: _____

Name of Organization: _____

Contact Person: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Usage Information

Room Requested: _____

Date(s) Requested: _____

Time(s) Requested: _____

Type of Meeting: _____ # of People Expected: _____

of Tables: _____ # of Chairs: _____ Other: _____

Set-Up Requested: _____

General Rules

- All functions must end by 6:30pm during summer hours and by 9:30pm Sept.-May.
- You **MUST** clean up after yourself. Please return the room to its original state.
- This is a multi-use facility, please be respectful as you will be sharing the building.
- Children must be supervised at all times.
- Recreation Department programs take priority for use of space.
- Please inform us should you decide to cancel or reschedule your function.

Filing this request does not automatically constitute approval. Please allow 3-5 working days for a response and confirmation via email. All requests will be reviewed and accepted/denied based on department policy, nature/scope of function, and facility/staff availability.